

DECLARATION AND POWER OF ATTORNEY--ORIGINAL APPLICATION

Atty.'s Docket No. 530-614

As a below-named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and co inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled "METHOD FOR EVALUATION OF BIOMARKERS DIRECTLY FROM BIOLOGICAL FLUID", the specification of which is attached hereto.

I hereby state that I have reviewed and understand the content of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

Power of Attorney: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Kristofer E Halvorson	Reg. No. 39,211 DIRECT TELEPHONE CALLS TO:				
SEND CORRESPONDENCE TO:					
The Halvorson Law Firm 405 W. Southern Ave, Suite 1 Tempe, Arizona 85282		Kristofer F., Halvorson (480) 449-3600			
Mr. Karl F. Gruber	Gruber	Karl	F.		
FULL NAME	FAMILY NAME	FIRST GIVEN	MIDDLE		
OF INVENTOR		NAME	INITIAL		
1975 E. University #241	Tempe	Arizona	USA		
RESIDENCE	CITY	STATE OR	COUNTRY OF		
		PROVINCE	CITIZENSHIP		
1975 E. University #241		Tempe Ariz	zona, 85281 USA		
POST OFFICE		CITY	STATE, ZIP CODE		
ADDRESS			& COUNTRY		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR

DATE

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DECLARATION AND POWER OF ATTORNEY-ORIGINAL APPLICATION

Atty.'s Docket No. 530-014

As a below-named inventor, I hereby declare that:

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Kristefer E. Halvorson SEND CORRESPONDENCE TO:			Reg. No. 39.211 DIRECT TELEPHONE CALLS TO			
Mr. Kemmons A. Tubbs	Tubbs		Kemmons	Α.		
FULL NAME	FAMILY NAME		FIRST GIVEN	MIDDLE		
OF INVENTOR			NAME	INITIAL		
2327 W. Del Campo Circle	Mesa		Arizona	USA		
RESIDENCE	CITY		STATE OR PROVINCE	COUNTRY OF CITIZENSHIP		
2327 W. Del Campo Circle		Mesa	Arizo	Arizona USA 85202		
POST OFFICE		CITY	\$1	TATE, ZIP CODE		
ADDRESS				& COUNTRY		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application of any patent issuing thereon.

SIGNATURE OF INVENTOR

DATE

/11/01

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DECLARATION AND POWER OF ATTORNEY-ORIGINAL APPLICATION

Atty.'s Docket No. 530-014

As a below-named inventor, I hereby declare that:

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Kristofer E. Halvorson		Reg. No.	39,211	
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The Halvorson Law Finn 405 W. Southern Ave, Suite I Tempe, Arizona 85282		Kristofer F. Halvorson (480) 449-3600		
Mr. Randall W. Nelson	Nelson	Runda	W.	
FULL NAME	FAMILY NAME	FIRST GIVEN		MIDDLE
OF INVENTOR		NAME		INITIAL
1 221 S. 51 St., #3013	Phoenix,	Arizona		USA
RESIDENCE	CITY	STATE OR		COUNTRY OF
		PROVII	4CE	CITIZENSHIP
1 1 221 S. 51 st St., #3013		Phoenix,	Arizo	ona 85044 USA
POST OFFICE		CITY	ST	TATE, ZIP CODE
ADDRESS				& COUNTRY

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SIGNATURE OF INVENTOR

DATE

Ly 11, 2001